## Terrestrial Animal Health Standards Commission Report

September 2007

### USA Comments

APPENDIX 3.8.8.

# GUIDELINES FOR THE ON SURVEILLANCE OF FOR CLASSICAL SWINE FEVER

Article 3.8.8.1.

#### Introduction

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Surveillance for CSF should be in the form of a continuing programme designed to either establish that a population in either the whole country, a zone, or a compartment is free from CSFV infection (either the whole country, or a zone within the country is free from CSFV infection or a compartment) or to detect the introduction of CSFV into a population already recognized as free.

. . .

**Comment/rationale:** there is no change in content. The suggested change improves the wording and flow of the sentence in this paragraph.

Article 3.8.8.3.

### Surveillance strategies

1. <u>Introduction</u>

...

#### 2. Clinical and virological surveillance

Beyond their role in targeted surveillance, clinical and virological surveillance for CSF has two aims: a) to shorten the period between introduction of CSF virus into a *disease* free country or *zone* and its detection, and b) to confirm that no unnoticed *outbreaks* have occurred.

In the past, clinical identification of cases was the cornerstone of early detection of CSF. However, emergence of low virulence strains of CSF, as well as new diseases - in particular such as post-weaning multisystemic wasting syndrome and porcine dermatitis and nephropathy syndrome have made such reliance less effective, and, in countries where such diseases are common, can add significant risk of masking the presence of CSF.

**Comments/rationale:** For clarity and better syntax, change the words "in particular" for the words "such as", as shown.

One element of clinical surveillance involves the detection of clinical signs of CSF by close physical examination of susceptible animals. The spectrum of *disease* signs and gross pathology seen in CSF *infections*, along with the plethora of other agents that can mimic CSF, renders the value of clinical examination alone somewhat inefficient as a surveillance tool. These factors, along with the compounding effects of concurrent *infections* and *disease* caused by ruminant pestiviruses, dictate underscore the need for laboratory testing in order to clarify the status of CSF suspects detected by clinical monitoring.

**Comments/rationale:** For clarity and better syntax, change the word "dictate" for the word "underscore", as shown.

. . .

Article 3.8.8.5

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## 2. Compartment free of CSF

The objective of surveillance in this instance is to demonstrate that the two subpopulations are effectively separated by measures that ensure the biosecurity of domestic pigs is to demonstrate the absence of CSFV infection in the compartment and the effectiveness of the separation of the two subpopulations by following the The provisions of Chapter 1.3.5. should be followed. The effective separation of the two subpopulations should be demonstrated. To this end, a biosecurity programme which plan that includes but is not limited to the following provisions should be implemented:

Comment/rationale: Improved wording

. . .

3. The *biosecurity* programme <u>plan</u> implemented would also requires internal and external monitoring by the *Veterinary Authorities* <u>Authority</u>. These elements <u>This monitoring</u> should include but are not limited to:

Article 3.8.8.6.

### Recovery of free status

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2. Country or zone free of Surveillance for CSF in wild pigs

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The design of a monitoring system for wild pigs is dependent on several factors such as the organisation of the *Veterinary Services* and resources available. The geographic distribution and

approximate size of wild pig populations need to be assessed as a prerequisite for designing a monitoring system. Sources of information may include wildlife conservation organisations, hunter associations and other available sources. The objective of a surveillance programme is to determine the geographic distribution and estimation of a target population.

**General Comment:** The 'objective of a surveillance program' is to determine if a given disease is present, and if so, at what prevalence. It is not to determine the geographic distribution of a target population and an estimation of its size. While the size and distribution are important components when designing a surveillance program, determining the size and distribution of a population are not the objectives of a surveillance program.